Board of Directors Zoom Board Meeting
Minutes
March 22, 2021

Present: Laurence B. Simon, Chairman; Melissa Gibbons, Secretary; Suzanne Brown; Christopher Carter; Paul Hopper; Nisha Hurst; Richard Kaplan; Joan Merrill; Nirmal Patel, MD MPH

Absent: none

Staff: Michel Baptiste, Housekeeping/Laundry Supervisor; Chris Ann Bennett, Infection Preventionist; Nadia Benson, Deputy and Director of Nursing; George Cossifos, Director of Admissions; Linda Marini, Assistant to Executive Director; John Mastronardi, Executive Director; Scott Neff, FNW Executive Director; Nunzio Raimo, Director of Financial Operations; Justine Vaccaro, Director of Social Work; Larry Vanterpool, Facilities Director; Frank Walsh, MD, Medical Director; Margaret Wayne, Associate Director of Nursing

Guests: Amy Badini; Andy Duus, BET Liaison; Elizabeth Franklin-Quigley; Beth Krumieich, BET Liaison; Tom McGuire; Mary Lou Carraher; Hilary Mitchell; Mary Alice Schulte; Sheilah Smith; Ellen Wolfson, Commission on Aging; Leslie Yager

Mr. Simon opened the meeting at 5:00 PM and reminded the audience that this is a public meeting, but not open for the public to speak.

Mr. Simon welcomed Paul Hopper, new member of the Board of Directors, appointed by the RTM on March 8th.

Medical Director’s Report – presented by Dr. Frank Walsh

Dr. Walsh stated that there is indication that the census is increasing as there were no open short-term beds until tomorrow. Census today was 178.

We have engaged a new provider of psychiatric services, Harvest Healthcare, LLC. Our current provider, Dr. Martin Drooker, who has served TNW well for 25 years, is retiring. As Dr. Drooker phases out during this month, Harvest Healthcare is in the process of taking over and providing those services to our residents.
Mr. Kaplan noted that he has been trying to meet with Dr. Walsh about Optum, a managed care program for long-term residents. Ms. Marini will follow-up for scheduling with Dr. Walsh’s assistant.

Ms. Gibbons asked if there was an advantage to continuing the current COVID testing for staff and residents regardless of the mandates. Dr. Walsh stated that once the facility has gone a substantial amount of time without a positive case, he does not find this testing regimen beneficial. If we learn that a staff member has COVID, we would test all staff and the residents on the floor where that staff member works. Ms. Benson noted that all residents have been tested on a regular basis for the last several weeks because we had been undergoing outbreak testing. Ms. Benson also noted that if DPH continues to supply the testing for staff at no cost, we will continue the testing. Once it is at the cost of the facility, we will re-evaluate.

**Review/Approval of Minutes of January 25, 2021**

A motion to approve the minutes of January 25, 2021 was made by Mr. Kaplan, seconded by Mr. Carter. A vote was taken, and the minutes were approved by a vote of 8-0-1. (Mr. Hopper abstained as he was not a member of the Board in January.)

**Executive Director’s Report - presented by John Mastronardi**

**Visitation Policy** – CMS has issued revised guidelines for in-person visitations. Mr. Mastronardi and staff have drafted a Visitation Policy and Procedure which he will forward to the Board for their review with the intention to implement by Wednesday, March 24th. He noted that this will be a “living document” as the guidance and circumstances continue to change.

**COVID Vaccinations** – Mr. Mastronardi reported that today, 86% of our residents have been fully vaccinated (that number changed from 89% due to discharges and transfers). As of today, 38.8% of the staff is vaccinated (national average per the CDC is 38%). Twenty-two staff members are currently registered with Vaccination Administration Management Systems (VAMS), and we remain in constant contact with the Town Department of Health so that those staff members can receive the vaccine. Should those 22 get vaccinated this week, which is our goal, we will be at 46.5% for staff vaccinations. If the remainder of the staff who have signed up register and receive the vaccine, it will put the facility at 53-55% for staff vaccinations.

- To date, 103 employees have been fully vaccinated: 70 full time employees (there are 152 full time staff) and 33 part time employees.
- We also continue to track those who have received their vaccinations outside of NW and bring proof of their vaccination to us.
Ms. Gibbons noted that in her personal experience, VAMS has not necessarily been the fastest way of scheduling. She will provide phone numbers she has found much more helpful in scheduling of appointments.

Ms. Benson stated that as we continue to work with the Town in facilitating these appointments, the Town has taken the list of staff registered in VAMS and directed employees to clinics within the tri-state area to be vaccinated.

Ms. Bennett noted that she and Mr. Mastronardi have also been working with Caroline Baisley and the Greenwich Department of Health to assist with staff vaccinations. Ms. Bennett has provided the Department of Health with the requested information and is waiting for appointment specifics from Ms. Baisley. It has been difficult to send staff to Town Hall without prior scheduling/notice. Ms. Bennett explained that we need more structure to the schedule to boost the compliance rate. Mr. Simon offered to contact First Selectman Fred Camillo to see if he can aid with the Greenwich Health Department in prioritizing the scheduling of our employees.

Ms. Bennett has also been assisting other staff members get scheduled for their vaccination through ZocDoc, Stamford Hospital, and other clinics; although going to Town Hall remains the preferred site for many employees.

Mr. Simon has appointed Ms. Hurst as the Vaccination Liaison to the Board. She will work with Ms. Bennett and provide weekly updates and help facilitate the vaccination schedule. Mr. Simon stated that the Board needs to be more closely informed as to where we are and what they may do to help. He asked Ms. Hurst to report and lead the discussion at the April Board Meeting.

Mr. Simon asked how we can make sure that new admissions get vaccinated. Ms. Benson said she is researching being able to keep a certain number of vaccine doses available and on-hand at our facility. She is aware of a facility in New York that has obtained 30 doses each week for the past three weeks from the Department of Health to administer as needed. This would help tremendously with getting both staff and residents vaccinated.

Dr. Patel questioned whether we can set up clinical workflow so that the residents that are not vaccinated are taken care of by staff that are fully vaccinated. Ms. Bennett stated that would not be possible with the staff vaccination percentages as low as they are. It would also cause us to publicize staff names which raises concerns about confidentiality. Ms. Benson stated that a persons’ vaccination status is their personal business and staff could be shamed for their vaccine choices.

Mr. Simon reviewed the key points in our new visitation policy as developed using the CMS guidelines:
  o Visitors do not have to be vaccinated; they need to be masked.
  o Visitors need to perform proper hand sanitizing.
Visits can be unlimited in length.
- Visits may continue outside.
- Guests may not wander the facility
- No communal full recreation programming/no communal dining until further notice, hopefully to resume this summer.

Management of Finances:
- Overtime in the first February 2021 pay period was $55K; it has decreased to less than $20K in the most recent March 2021 pay period.
- The managing of pharmacy formularies is estimated to create savings of $70-80K annually.
- Hospital readmission rates are important because they reflect the quality of care that we give over a 3-month period and the costs to our partnering hospitals if we send a resident out. Treating in place can be much more cost efficient.
- SNF at Home program: establishing a resource to the community that provides skilled nursing, therapy care, and aide coverage at home.
- A review of all vendor contracts.
- Purchasing through a Group Purchasing Organization (GPO)
- Performing Inventory Management for efficiencies.
- Right sizing staff size and complement - Mr. Mastronardi explained that if the facility were to be purchased, new ownership/management would cut staff by 30% for an immediate cost reduction. Staff layoffs thus far reflect less than a 4% reduction in staff at an annual savings of $995K annually (salary and benefits):
  - 3 Patient Care Coordinators (PCC)
  - 2 full time RN's; 1 currently vacant RN position will not be filled
  - 1 CNA; 3 CNA's have retired; those positions will not be filled
  - 1 Admissions Representative resigned; that position will not be filled.

We will add nursing positions to enhance our quality of care: a restorative nurse and a nurse case manager.

We will continue to monitor key quality indicators during this reorganization to ensure that the quality of care remains outstanding, and we will make adjustments if/when needed. Mr. Mastronardi stated that these cost savings can be achieved while making the quality of resident lives better.

Mr. Mastronardi completed his report by reiterating his point that TNW needs to be financially viable in order to continue to operate: “No margin, no mission”.

Mr. Kaplan asked if the layoffs affected those in direct care roles. Of the 7 positions, 2 were active full time RN positions (a third could not return for medical reasons and we will not fill); 1 was an active full time CNA (3 other CNA positions vacant due to retirements will not be filled). Ms. Benson explained that there will now be 1 Patient Care Coordinator (PCC) per 2 units; 1 Charge Nurse and 1 Med Nurse on each unit. The PCC positions being eliminated are currently held by RN’s; those RN’s were given the opportunity to assume the role of part time Charge Nurse on their units (2
accepted, 1 is pending). Ms. Benson made assurances that in long-term care a unit can be run effectively and efficiently by an LPN at night with an RN Supervisor overseeing the care. She clarified that there will be no changes for the day or evening shifts on the long-term units. Short-term rehab units will continue to be staffed with an RN on all 3 shifts.

**Building Committee Report - presented by Larry Vanterpool**

Mr. Vanterpool reported that the Building Committee met on Tuesday, March 9, 2021 and discussed the following:

**Tower Electrical Panel replacement**  
The RFB has been developed and a mandatory pre-bid meeting was held on Wednesday March 17, 2021 here at Witherell. Four electrical contractors attended the meeting and Stantec Representatives were present to answer any questions the contractors had regarding this project. One of the pre-requisites for the contractors was that they have at least a 2-year proven record of working in a healthcare setting to ensure they understand the needs and urgency of the project, for example, the major impact of shutdowns on operations. Mr. Hopper noted that the pre-bid meeting went very well, with a high interest on behalf of the contractors present. Bids are due by March 31st.

**Pavilion Exterior Renovation - CDBG Block Grant**  
The RFB has been awarded to AVT Construction in the amount of $55,444. This project has moved to contract development and the contractor is working on meeting insurance requirements.

Mr. Vanterpool reported that on February 27, 2021 we had a main water line break in a supply line that supplies the entire facility. Fortunately, the impact was minimal, as the incident was detected early. The repair required significant investments, notably the replacement of a backflow preventer. On the positive side, this need was anticipated and already incorporated into the budget for next year.

**Finance Report – presented by Nunzio Raimo**

Mr. Raimo reviewed the Financial Statement and Operating Results for the period ending February 28, 2021:

- NW Census by payer class for February 2021: total days billed in February 2021 were 4,645, showing a growth in census despite the shorter length of the month by 3 days.
- Occupancy Percentage for February 2021 was 82% and average beds per day was 165.9 - the highest to date for this fiscal year. Mr. Raimo noted that at 3 weeks into the month of March we are running at an average daily census of 170.
● Revenue by Payer Class: February revenue from operations was $1,977,961. Private pay and Medicare A were the highest payors and are increasing; Medicare A was slightly higher than average at $431,724.
● Two efficiency metrics were highlighted: 1.) Revenue per FTE (which is an indicator of staffing efficiency) for February 2021 was $7,036; 2.) Revenue per billable day (which shows the efficiency of our revenue stream from operations) for February 2021 was $426, still higher than 3 of the last periods even with a shorter month.
● Total Revenues for the month of February 2021, including COVID related payment received from CT Dept. of SS, HHS and CMS, was $2.194M.
● Revenue February YTD Actual was $16,005,179 compared to budget of $18,848,000, resulting in a negative variance of $2,842,821.
● Expenses from Operations for February 2021 YTD Actual were $13,295,327 compared to budget of $13,995,991, resulting in a positive savings year to date of $700,664.
● February 2021 YTD Margin Before Debt & Allocation of $2,709,852; $2.1M under Budget.
● February 2021 YTD Margin Before Debt & Capital was $983,157 compared to our budget of $876,930 resulting in a variance of ($1,860,087). Actual Capital Expenditures were $77,868, and Deferred Revenues were $2.251M Revenue(State & Federal monies received for COVID expenses). Operating Profit before Debt Service of $1.189M was almost $400K in our favor.
● Net Revenues/(Expenses) after COVID monies are in a favorable position of $356,353.
● Benefit Summary for YTD February 2021 variance to budget was a savings of $276,901.
● For February YTD 2021 Salaries & Wages were under budget by $554,059.
● For February YTD 2021 OTPS were $680,390 compared to a budget of $635,809, a negative variance of $44,582 due bills that came in during February, i.e. Matrix (every 3 months), legal & advertising fees.
● For February YTD 2021 Supplies & Materials were below budget by $169,558.
● For February YTD 2021 Maintenance expenditures were below budget by $21,627.
● Overall Gain/(Loss) Fiscal Year to date at ($1.8M); after COVID money at $356,353.

Marketing – presented by Christopher Carter

Mr. Carter reported the following:
● This year we are doing some geographic targeting around Westchester Hospital and the Hudson Valley hospitals.
● We are working with Hearst to track leads to affirm that our advertising is working
● We have some new print ads coming out, focusing on short-term rehab and skilled nursing.
● Regarding social media, since our last meeting we have had 28 posts. The biggest engagement was on Fairfield County Giving Day which reached over 10,000 people.
● Three blogs were noted: Sepsis Care; Vaccines; Visitation and CMS Guidelines.
● We are working with a new website vendor to help with hosting, SEO and maintenance, and are finalizing the design. Regarding the creation of a login specifically for family use, Messrs. Carter, Mastronardi and Neff have discussed the pros and cons with Harrison
Edwards and believe the costs associated would be prohibitive. No competitors are currently offering this option.

- Mr. Mastronardi provided a Nathaniel Witherell response to the Greenwich Time coverage of the *Let the Families Back in Movement*. This was also posted in our Facebook feed.

**Friends of Nathaniel Witherell (FNW) – presented by Scott Neff**

On Thursday, Feb. 25, 2021 Friends of Nathaniel Witherell participated in the Fairfield County Community Foundation Online Day of Giving. This online event brought in donations from 96 donors this year. All of the proceeds raised by FNW during that event will go to the Resident Life Fund.

Mr. Neff reported that the Community Appeal has exceeded the goal from last year. He continues to do follow-up with past supporters who we have not heard from and anticipates that we will continue to receive contributions through the fiscal year end of June 30, 2021. Mr. Neff will also look into reaching out to vendors who have contributed in the past.

**Chairman’s Discussion – presented by Laurence Simon**

Mr. Simon stated that we have adequately covered the topics of Vaccination Status and Visitation Policy previously in this meeting.

Mr. Simon thanked everyone for their time and effort during these challenging times and sees the facility doing much better now going forward. He noted that the census continues to rise (currently 178); case mix is steadily improving (more Med A cases); long-term beds are beginning to fill; and we are making management changes.

Mr. Simon stated that Mr. Mastronardi is doing a great job in finding cost savings which will make us a stronger place in which to work.

Mr. Simon reminded the audience, as he had stated at the January 25, 2021 Board Meeting, if anyone has an item to be considered or discussed at the Board Meeting, it needs to be submitted to Mr. Simon at least 5 days in advance of the meeting.

**New Business - none**

A motion to adjourn the meeting was made by Mr. Kaplan seconded by Ms. Brown and the meeting was adjourned at 6:37 PM.

Respectfully Submitted,
Linda Marini
March 29, 2021